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Ľ	nder the Paperw PA	ork Reduction Act TENT APPLI	CATIO	N FEE DET itute for Form P	to a collection of i	collection of Information unless it displays a valid OMB control number Application or Docket Number			control number	
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
_	FOR	NUM	NUMBER FILED NUM		BER EXTRA	RATE	FEE	1	RATE	FEE
(37	SIC FEE CFR 1.16(a))						\$	OR		s
	TAL CLAIMS CFR 1.16(c))		minus 20 =			x s_ =	1	1 .	\	•
	EPENDENT CLA CFR 1.16(b))	IMS	minus 3 =					OR	X \$=	
					X \$=	 	OR	× \$=	ļ	
						+ \$ =	 	OR	+ \$=	
* If the difference in column 1 is less than zero, enter *0" in column 2.					TOTAL	L	OR	TOTAL		
CLAIMS AS AMENDED - PART II										
	· · · · · · · · · · · · · · · · · · ·	(Column 1)			(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL /
	Total (37 CFR 1.16(c))	6	Minus	- 20	=	x \$ =	FEE/	İ		FEE
	Independent (37 CFR 1.16(b))		Minus	2	=		 /-	OŖ	× \$=	
	FIGURE PROFESSIVE VIOLENCE AND ADDRESS OF THE PROFESSIVE AND ADDRE					X \$=	/	OR	X \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ = TOTAL	 /	OR	+\$=	/
						ADD'L FEE	<u> </u>	OR	TOTAL ADD'L FEE	
		(Column 1)	,	(Column 2)	(Column 3)					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$ =		OR	× s_ =	1.6
	Independent (37 CFR 1.16(b))	•	Minus	***	=	× \$ =				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ =		OR OR	+ \$ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
_ ,		(Column 1)		(Column 2)	(Column 3)					_
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	••	=	x s_ =		OR	X \$ =	
	Independent (37 CFR 1.16(b))	•	Minus		=	x \$ =		OR	x s =	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$=		OR	+ \$ =	
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 								OR	TOTAL ADD'L FEE	
•	If the "Highest N If the "Highest N	lumber Previously Iumber Previously	Paid For" Paid For"	IN THIS SPACE	is less than 20, e	ntor "20"	ho nassasists			

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the armount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.